





PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Odak et al.

Group No.: 1723

Serial No.:

09/976,830

Examiner: Unknown

Filed:

13 October 2001

For: Blood Separation Systems and Methods with Umbilicus-Driven Blood Separation Chambers

Commissioner of Patents and Trademarks Washington, D.C. 20231

STATEMENT BY ATTORNEY THAT APPLICATION FILED IN PTO IS THE ONE INVENTOR(S) EXECUTED BY SIGNING DECLARATION

I, <u>Daniel D. Ryan</u>, Registration No. <u>29,243</u>, of RYAN KROMHOLZ & MANION, S.C., P.O. Box 26618, Milwaukee, Wisconsin 53226-0618, {(262) 783-1300} state I am an attorney for this application and the application identified above is the application which the inventor(s) executed by signing the declaration which is being submitted herewith.

	CERTIFICATE C	OF MAILING (37 (CFR 1.8a)
		sufficient postag	eing attached or enclosed) is being deposited with the e as first class mail in an envelope addressed to the:
Date	25 February 2002	Ву	to the first because
			Mary Szollar (Typed Name of Person Signing Paper)



Attorney's Docket No. F-5490 CIP 1

COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

			TYI	PE OF DECLARATION
This de	eclaratio	on is of th	ne following type:	(check one applicable item below)
	[] o	riginal		
	[] d	esign		
	[] s	uppleme	ntal	
NOTE:				al Application being filed as a divisional, continuation or continuation-in-part ack appropriate one of last three items.
	[] n	ational st	tage of PCT	
NOTE:	If one o		ing 3 items apply then o	complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION
	[] d	ivisional		
	[] c	ontinuatio	on	
	[x] c	ontinuati	on-in-part (CIP)	
			INVENT	TORSHIP IDENTIFICATION
WARNII	VG:			he inventors of all the claims an explanation of the facts, including the ownership he last claimed invention was made, should be submitted.
origina plural r	l, first a	nd sole i are listed	nventor (if only on-	tizenship are as stated below next to my name. I believe I am the ne name is listed below) or an original, first and joint inventor (if oject matter which is claimed and for which a patent is sought on
	RI (OOD SE		TITLE OF INVENTION TEMS AND METHODS WITH UMBILICUS-DRIVEN
		<u> </u>		D SEPARATION CHAMBERS
			SPECIE	FICATION IDENTIFICATION
45	:6:A:	6		
the spe			ch: (complete (a),	
	(a)	[x]	is attached here	
	(b)	[x]	or [] Express M and was amend	13 October 2001 as [x] Serial No. 09/ 976,830 Mail No., as Serial No. not yet known(if applicable).
NOTE:	filing da applica	ate by beir tion paper	ng referred to in the dis s or, in the case of	pers are deposited with the PTO which contain new matter are not accorded a declaration. Accordingly, the amendments involved are those filed with the f a supplemental declaration, are those amendments claiming matter not of invention or claims. See 37 CFR 1.67.
	(c)	[]	was described a as amended und	and claimed in PCT International Application No filed on and nder PCT Article 19 on (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment riferred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

(also check the following item, if desired)

[] In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) [x] no such applications have been filed.
- (e) [] such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN
12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS
APPLICATION AND ANY PRIORITY CLAIMS UNDER
35 U.S.C. S 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUM- BER	DATE OF FILING (day, month, year)	PRIORITY CI UNDER 37 U	
			[]YES	NO[]
			[]YES	NO[]
		•	[]YES	NO[]
			[]YES	NO[]
			[]YES	NO[]

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in—part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S. C. S 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Daniel D. Ryan (29,243) John M. Manion (38,957) Patricia Jones (46,318) Daniel R. Johnson (46,204) Michael C. Mayo (38,545) Allan O. Maki (20,623) Joseph A. Kromholz (34,204) Laura A. Dable (46,436) Bradford R.L. Price (29,101)

(check the following item, if applicable)

[] Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

BAXTER HEALTHCARE CORPORATION Bradford R.L. Price, Fenwal Division RLP-30 Route 120 and Wilson Road Round Lake, Illinois 60073 DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Bradford R.L. Price (847) 270 - 2632

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) ha	me as it snould appea	r on the illing receipt a	and an other docume
Full nam of sole or first inventor			
SANJAY			ODAK
(GIVEN NAME) Inventor's signature	MIDDLE INITIAL OR NAME)	FAMI	LY (OR LAST NAME)
	f Citizenship	IN	
	YSLAKE, ILLINOIS	111	
	ORCHESTER LAN	<u></u>	
***	YSLAKE, ILLINOIS		
GRA	TSLAKE, ILLINOIS	60030	
Full name of second joint inventor, if any	_		
MICHAEL			KAST
(GIVEN NAME) Inventor's signature Muchoul	NIDDLE INITIAL OR NAME)	.FAM	ILY (OR LAST NAME)
Date Country o	f Citizenship	US	
	ISTON, ILLINOIS		
	ASHLAND AVENU	Ε	
	STON, ILLINOIS 6		
		n•	
Full name of third joint inventor, if any	_ 7/P. 1-23	·	
VAUGHN	E.		RICE
	(IDDLE INITIAL OR NAME)	FAMIL	Y (OR LAST NAME)
Inventor's signature Taugh E	70		
		US	·
	<u>ND LAKE BEACH, I</u>	LLINOIS	
Post Office Address820 N	MAYFIELD DRIVE		
ROU	ND LAKE BEACH, I	LLINOIS 60073	•
Full name of fourth joint inventor, if any			
TOM /			WESTBERG
	IDDLE INITIAL OR NAME)	FAMIL	Y (OR LAST NAME)
Inventor's signature104000	<u> </u>		
Date 12/11/01 Country o	f Citizenship	Fi	
Residence GUR	NEE. ILLINOIS		
	POND RIDGE CI	RCLE	
	NEE, ILLINOIS 600		
		.24-02	
Full name of fifth joint inventor if any	الممدر		
Full name of fifth joint inventor, if any KELLY	$\mathbf{P}^{\prime\prime}$		CMITH
	(IDDLE INITIAL OR NAME)		SMITH Y (OR LAST NAME)
Inventor's signature	TWILL.	FAIVIL	. I (OIL MOT IAMIE)
		US	
	NEE, ILLINOIS	00	
	RYSTAL PLACE	n.4	
GURI	NEE, ILLINOIS 600	31	

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

[x]	Signature for sixth and subsequent joint inventors. Number of pag s added1

[]	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added

[]	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added

[×]	Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.
	[x] Number of pages added2
	, ***
[]	Authorization of attorney(s) to accept and follow instructions from representative

	(If no further pages form a part of this declaration then end this declaration with this page and check the following item:)
	1. This declaration ands with this page

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sixth joint in\	renitor, if any	
MICHEL	<u> </u>	JOIE
(GIVEN NAME)	(ANDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature		
Date De la la		<u> </u>
Residence'	ERNAGE, BELGIUM	
Post Office Address	13 RUE CAMILLE CALS	
	ERNAGE, BELGIUM B-5030	
	ENIVAGE, BEEGIOW B-3000	
	ENTAGE, BEEGIGIN B. 5000	
Full name of seventh joint	inventor if any	
-	. inventor, ir arry	VANDUIZ
MARK		VANDLIK
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature		
Inventor's signature Date	Country of Citizenship	
Date	Country of Citizenship	
Date Residence	Country of Citizenship	· · · · · · · · · · · · · · · · · · ·
Date	Country of Citizenship	
Date Residence	Country of Citizenship	
Date Residence Post Office Address	Country of Citizenship	
Date Residence	Country of Citizenship	
Date Residence Post Office Address Full name of eighth joint in	Country of Citizenship	
Date Residence Post Office Address	Country of Citizenship	FAMILY (OR LAST NAME)
Date Residence Post Office Address Full name of eighth joint in (GIVEN NAME) Inventor's signature	nventor, if any (MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Date Residence Post Office Address Full name of eighth joint in (GIVEN NAME) Inventor's signature	nventor, if any (MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Date Residence Post Office Address Full name of eighth joint in (GIVEN NAME) Inventor's signature Date	nventor, if any (MIDDLE INITIAL OR NAME) Country of Citizenship	FAMILY (OR LAST NAME)
Date Residence Post Office Address Full name of eighth joint ir (GIVEN NAME) Inventor's signature Date Residence	nventor, if any (MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

MAIOLIEI	entor, ir any	
MICHEL		JOIE
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature		
Date	Country of Citizenship BE	
Residence	ERNAGE, BELGIUM	
Post Office Address	13 RUE CAMILLE CALS	
	ERNAGE, BELGIUM B-5030	
Full name of seventh joint i	nventor, if any (MIDDLE ANITIAL OR NAME)	VANDLIK FAMILY (OR LAST NAME)
(GIVEN NAME)	(MIDDLENITIAL OR NAME)	FAMILY (OR LAST NAIVE)
inventor's signature		
Date / /4/07	Country of Citizenship	
Date <u>//4/0</u> Z Residence <u>3-545</u>)		D 5-7476 52
Date //4/02 Residence 2-545 /	Country of Citizenship	
Date //4/02 Residence 2-545 /	Country of Citizenship	· · · · · · · · · · · · · · · · · · ·
Inventor's signature Date Residence Post Office Address Full name of eighth joint inv	Country of Citizenship	· · · · · · · · · · · · · · · · · · ·
Date	rentor, if any	ein II. Cource
Post Office Address Full name of eighth joint inv (GIVEN NAME)	Country of Citizenship	· · · · · · · · · · · · · · · · · · ·
Post Office Address Full name of eighth joint inv (GIVEN NAME) Inventor's signature	rentor, if any (MIDDLE INITIAL OR NAME)	ein II. Cource
Post Office Address Full name of eighth joint inv (GIVEN NAME) Inventor's signature Date	rentor, if any	ein II. Cource
Post Office Address Full name of eighth joint inv (GIVEN NAME) Inventor's signature	rentor, if any (MIDDLE INITIAL OR NAME)	ein II. Couce





Attorney's Docket No.

F-5490 CIP 1

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION

(complete this part only if this is a divisional, continuation or C-I-P application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, S 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, S 112, I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120:

Status (CHECK ONE)

U.S. APPLICATIONS U.S. FILING DATE		Patented	Pending	Abandone
1. 09 / <u>976,830</u> 2. 0 /	13 OCTOBER 2001		X	
	PCT APPLICATION	NS DESIGNATING	THE U.S.	
PCT APPLICATION NO.	PCT FILI DATE	NG	NO	U.S. SERIAL S. ASSIGNED (if any)
4	•			
6.				······································



35 USC 119 PRIORITY CLAIM, IF ANY, FOR ABOVE LISTED U.S./PCT APPLICATIONS

DE	DETAILS OF FOREIGN APPLICATION FROM WHICH PRIORITY APPLICATION CLAIMED UNDER 35 USC 119					
Above Appln. No.	Country	Application No.	Date of filing (day, month, year)	Date of issue (day, month, year)		
1						
3.						
4 5.						
6.						